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<b>Date</b>	November 23, 2004	<b>Phone</b>	<b>Fax</b>
<b>To</b>	Commissioner for Patents, USPTO		703-872-9306
<b>From</b>	James D. Jacobs	+1 212 891 3951	+1 212 310 1651
<b>Client/Matter No.</b>	56129861-1		
<b>Re</b>	Withdrawal as Attorneys		
<b>Pages (w/cover)</b>	4		

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PTO/SB/21 (09-04)

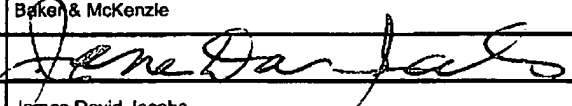
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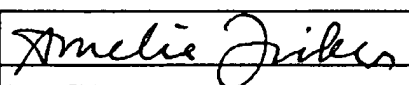
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	Filing Date	see attached list
	First Named Inventor	see attached list
	Art Unit	see attached list
	Examiner Name	see attached list
	Attorney Docket Number	see attached list
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Baker & McKenzie		
Signature			
Printed name	James David Jacobs		
Date	11/23/2004	Reg. No.	24,299

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Typed or printed name	Amelia Finker	Date	11/23/2004

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PTO/SB/83 (09-04)

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**REQUEST FOR WITHDRAWAL  
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Application Number	see attached list
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First Named Inventor	see attached list
Art Unit	see attached list
Examiner Name	see attached list
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Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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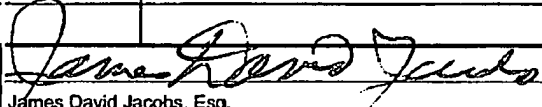
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<input checked="" type="checkbox"/> Firm or Individual Name	Richard F. Jaworski, Esq.		
Address	Cooper & Dunham LLP 1185 Avenue of the Americas		
City	New York	State	NY
Country	USA		
Telephone		Fax	
Signature			
Name	James David Jacobs, Esq.	Registration No.	24,299
Date	11/23/2004	Telephone No.	212-751-5700

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Application no.	Filing date	First Named Inventor	Art Unit	Examiner Name	Docket Number
09/418,751	10/15/1999	Tad Deffler	3624	Colbert, Ella	56129861-10
09/066,183	4/24/1998	Christopher Parker	2171	Mizrahi, Diane	56129861-14
09/420,223	10/16/1999	Tad Deffler			56129861-2
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08/883,283	6/27/1997	Tim Barry	2771	Jung, David Yiuk	56129861-23
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10/862,590	6/7/2004	Vincent Re			56129861-283
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60/572,600	5/19/2004	Perry Ross			56129861-286
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